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** CONTINUING DATA ***** *[Signature]*

** FOREIGN APPLICATIONS ***** *[Signature]*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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|--|------------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY OH | SHEETS DRAWING 7 | TOTAL CLAIMS 21 | INDEPENDENT CLAIMS 3 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | Verified and Acknowledged | Examiner's Signature | Initials | |

ADDRESS
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TITLE
 Toolholder with insert clamp and method for the same

| | | |
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| FILING FEE | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
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